

Progress against Quality Priorities 19/20 and Priorities for 20/21

The Joint Health
Overview
and Scrutiny
Committee.
For Information June
2020



2019/2020 Priorities

Patient Safety

- Reducing Never Events- particularly around safe surgery and procedures
- Launching the National Early Warning Score (NEWS 2)
- Patient Safety Response Teams
- Reducing stillbirths

Clinical Effectiveness

- Sepsis care antibiotics within 1 hour
- Reducing the number of stranded patients
- Digital Roll-out of the SurgiNet module in Cerner Millennium to support best care for patients undergoing surgery and procedures.

Patient Experience

- Patient portal to support better interaction with hospital services
- Care of patients with mental health issues.
- The Home Assessment Reablement Team (HART) services.



Did we achieve the 19-20 Quality Priorities?



NHS Foundation Trust

Reducing Never Events- safe surgery and procedures Fully achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
The OUH had 11 Never Events in 2018-19 and this Quality Priority was voted to continue from last year. The priority is to produce more OUH Local Safety Standards for Invasive Procedures (LocSSIPs) and thereby reduce the incidence of avoidable adverse events, particularly around procedures and so reduce Never Events.	10 LocSSIPs to be developed in 19/20. Aim for 100% compliance with WHO Surgical Safety Checklist. Complete all actions from root causes analyses following NEs in 2018-19. Demonstrate learning across all Divisions at Governance meetings. Run an action planning workshop with input NHSI, PSA and CG to ensure further actions are put in place to prevent recurrence of serious incidents / Never Events (NE's). Finalise the remaining overarching policies: WHO Surgical Safety Checklist Policy. Prosthesis Verification Policy.	16 LocSSIPs produced. WHO compliance for March 2020 at least 99%. 100% of Never Event actions for 2018/19 have been completed. Commissioner assurance visits and a safety symposium have taken place. An action planning workshop took place on 30/04/19. The remaining policies have all been finalised.



Launching the National Early Warning Score (NEWS 2) Partially achieved.

Why we chose this Quality	How we evaluated success	Evaluation March 2020
Priority		
In April 2018 NHS England mandated the implementation of	a. Define a process for the use of Scale 1 (Standard chart).	Items a-f) have been completed.
NEWS2 across all acute		Item g) outstanding:
hospital trusts and ambulance	b. Define a process for the assessment	SEND product software completed
services by March 2019.	and recording 'Acute Confusion.'	October 2019. Due to COVID-19
	c. Produce revised escalation guidance.	pandemic completion due in 2020-21.
	d. Define the process for use of scale 2 (Chart for patients with Type 2 Respiratory Failure).	
	e. Deliver training.	
	f. Deliver communication strategy.	
	g. Deliver technical requirements for the deployment of NEWS2 within the System for Electronic Notification and Documentation (SEND) platform.	

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Patient Safety Response Teams

Fully achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
This award-winning concept has been successfully introduced in another Trust.	Pilot a Patient Safety Response (PSR) Team for 8-12 weeks in the JR and West Wing and evaluate before being considered for Trust-wide roll out.	Pilot and evaluation complete July 2019. Process formally launched Trust- wide17 September 2019, World Patient Safety Day.



Reducing stillbirths

Fully achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
National ambition to halve the rates of stillbirths by 2030, with a 20% reduction by 2020.	Reducing stillbirth rate from 5.2 per 1000 births to 4.0 per 1000 births using 'Saving Babies' Lives' Care Bundle: Reducing smoking.	Carbon monoxide testing, referral to Stop Smoking service offered. Routine 36 week growth ultrasound, increased surveillance offered.
	Increasing surveillance of pregnancies at risk of fetal growth restriction.	Baby movements regularly checked.
	Raising awareness of reduced fetal movement.	Standardisation and competency based training in place across the region for monitoring during labour.
	Providing effective fetal monitoring during labour.	Stillbirth rate per 1000 births continues to fluctuate (2019-20: Q1 4.18, Q2 5.57, Q3 3.14) but
	Reducing preterm births.	less than 4.0.



Sepsis care- antibiotics within 1 hour Partially achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
Prompt recognition and treatment reduces severity of illness.	More than 90% sepsis patients receive antibiotics within an hour.	80% intravenous antibiotics within an hour was highest achievement.
Voted by stakeholders to continue into 2019-20.	Undertake an audit and share learning. Include 'Sepsis' on a 'Grand Round'.	Audit completed and learning shared. Grand Round completed.



Reducing the number of stranded patients Fully achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
Voted by stakeholders to continue into 2019-20.	16% reduction in number of patients with an extended Length of Stay (LOS) of over 21 days, to fewer than 110 patients.	At year end an average of 60-49 patients had an extended LOS over 21 days.



SurgiNet module to support best care for surgical patients Partially achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
Reduces potential risk created by 'paper gaps' in clinical information.	Design, build and test new modules.	New modules designed, built and tested.
Problems identified at pre-assessment can flow into the EPR. Provides consistency.	Undertake staff training.	Due to pandemic, training now commencing August 2020. First theatre suite goes live September 2020.
Replaces older systems.		



Patient portal

Partially achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
Offers patients a new route to engage with our services.	Will be available to all services ready to deploy it. Will enable patient access to lab, radiology and pathology results. Will enable patients to contribute information through 'clipboard' surveys and secure messaging. Will be accessible through a smartphone application and website.	Went live in Diabetes in February 2019. Feedback obtained from patients and staff. Trust wide rollout approved for letters, discharge summaries, maternity booking, lab and pathology results. Will in future support completion of patient questionnaires and Patient Reported Outcome Measures (PROMs), allergy and home medications updates, and clinician-patient messaging
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Care of patients with mental health issues Fully achieved

How we evaluated success	Evaluation March 2020
Child and adolescent mental health services (CAMHS) and	Children with a mental health presentation risk assessed
emergency department psychiatric service (EDPS) see 100% of patients within an hour	with a management plan before admission.
of referral.	Escalation process agreed for young people in the children's
Length of stay of patients with mental health issues in the	hospital.
emergency department will always be under 12 hours.	EDPS seeing patients within 1hr of referral.
	No12hr breaches.
	Child and adolescent mental health services (CAMHS) and emergency department psychiatric service (EDPS) see 100% of patients within an hour of referral. Length of stay of patients with mental health issues in the emergency department will



Home Assessment Reablement Team (HART) Not achieved

Why we chose this Quality Priority	How we evaluated success	Evaluation March 2020
Voted by stakeholders to continue into 2019-20.	Increase the proportion of those returning to independent living from 57% to 60%.	Due to challenges with recruitment the proportion of service users returning to independent living was 56%.



Quality Priorities 2020/21

- Approximately 70 patients, Foundation Trust governors, members, and staff took part in an event on Monday 13 January 2020.
- The top three Quality Priorities voted to continue were:
 - Care of patients with mental health issues (to be expanded further than the Emergency Department).
 - The Home Assessment Reablement Team (HART) services.
 - Reducing the number of patients with an extended length of stay (LOS).
- The feedback from the 'Quality Conversation' event was very positive
 - 90% finding the event useful or extremely useful and 100% of attendees felt they were able to contribute to decisions about the future quality priorities.



Finalised Quality Priorities 2020-21

Patient safety

- NEWS2.
- Safety huddles.
- Insulin safety.

Clinical effectiveness

- Reduction of nosocomial COVID-19 in the OUH.
- Staff health and wellbeing: Related to feedback from the Staff survey.
- Improving the mental health care of patients in the whole Trust as well as in the Emergency Department.

Patient experience

- HART: Supporting service users to return to independent living following discharge.
- Reducing the number of patients with an extended length of stay (LOS).
- Gathering information to understand the impact of cancelled admissions and procedures on patients and their families.





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